

Application for

# NATURAL RESOURCES CAREERS CONFERENCE

Hickory Environmental Education Center in Garrett County, MD

Sunday, July 23 through Saturday, July 29, 2006



Presented by the  
**Maryland Association of Forest Conservancy District  
Boards and the Maryland Forestry Board Foundation**  
in partnership with the  
**Maryland Department of Natural Resources—  
Forest Service and  
Allegany College of Maryland**

This seven-day conference is designed for Maryland high school students interested in pursuing a career in forestry and natural resources. Students will learn about working in the field of natural resources, educational requirements, employment and career opportunities in forestry, water resources, and other related disciplines from teams of natural resource professionals.

Students must be entering the 9th grade at the time of the 2006 Natural Resources Careers Conference to be eligible. The 24 Maryland Counties and Baltimore City Forestry Boards select the students to attend. The Forestry Boards pay for each student's conference fee.

Please return application by **April 15, 2006** to:

Pam Kelly  
Maryland DNR Forest Service  
Tawes State Office Building, E-1  
580 Taylor Avenue  
Annapolis, MD 21401

OR: Your County/City Forestry Board (listed below)  
\*indicates Forestry Boards with websites  
For contact info go to: [www.mdforest.sailorsite.net](http://www.mdforest.sailorsite.net)

Allegany	Charles	Prince George's
Anne Arundel*	Dorchester	Queen Anne's
Baltimore City*	Frederick	Talbot
Baltimore Co. *	Garrett*	St. Mary's
Calvert	Harford	Somerset
Caroline	Howard*	Washington
Carroll*	Kent	Wicomico
Cecil	Montgomery*	Worcester

**2006 Natural Resources Careers Conference**  
**Application Form**  
(please print)

Student Applicant: \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Street*  
\_\_\_\_\_  
*City MD. Zipcode County*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian Work Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SEX: \_\_\_\_M \_\_\_\_F

Entering Year in School in September 2006:

Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_

Name of High School: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street*  
\_\_\_\_\_  
*City State Zip Code*

School Phone Number: \_\_\_\_\_ Principal: \_\_\_\_\_

Are you planning to attend college? YES \_\_\_\_ NO \_\_\_\_

If yes, are you interested in studying in the field of natural resources? YES \_\_\_\_ NO \_\_\_\_

If yes, which natural resources area are you most interested in? \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

Will you promote NRCC or serve as a reference for future students? YES \_\_\_\_ NO \_\_\_\_

Please include the following with this application:

- \_\_\_\_ 1. A brief paragraph describing why you are interested in attending the NRCC 2006.
- \_\_\_\_ 2. Awards or recognitions received.
- \_\_\_\_ 3. Outside activities you participate in. (Clubs, volunteer work, scouts, etc.)
- \_\_\_\_ 4. Two letters of reference by teachers, counselors, club advisers or other adults who are *not* a parent or family member.

## 2006 NATURAL RESOURCES CAREERS CONFERENCE

### Agreement to Rules & Code of Conduct

*This agreement is necessary to ensure a uniform code of conduct and allow for an understanding of all parties involved while participating in the 2006 Natural Resources Careers Conference.*

I agree to follow all rules and regulations established by the Maryland Association of Forest Conservancy Boards Association and the Maryland Department of Natural Resources— Forest Service. Failure to follow these rules and regulations, staff requests or failure to conduct myself in a manner that will promote a safe and successful experience, will result in my *immediate* dismissal from the conference. My parents or guardians will be responsible for transporting me promptly from the Hickory Environmental Education Center, Accident, MD, following notification of dismissal should such disciplinary action be required. My parents or guardians will also be responsible for reimbursing the Forestry Board that paid \$300 for my conference fee. In addition, any property damage due to my misconduct will be billed to my parent/guardian.

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*Signature of Student Applicant*

*Date*

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*Signature of Parent or Guardian*

*Date*

### Photo Release

I hereby give my permission for my child's picture to be used in the Maryland Department of Natural Resources—Forest Service publications, video and website.

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*Signature of Parent Guardian*

*Date*

### Release Statement

I acknowledge that there are natural hazards associated with educational activities in an outdoor setting. I hereby affirm that my child is in good health and physically capable of performing the required activities during the Natural Resources Careers Conference 2006. In consideration of the Maryland Department of Natural Resources—Forest Service accepting my child and to the extent permitted and provide by State Law, I hereby release and forever discharge the State of Maryland, its units, agents, and employees from all claims of liability for any damages or injuries which may be sustained while my child is participating in the Natural Resources Careers Conference.

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*Signature of Parent/Guardian*

*Date*

**2006 Natural Resources Careers Conference**  
**Medical History & Release**

Student Applicant: \_\_\_\_\_  
*Last First Middle*

\_\_\_\_\_  
*Mother/Guardian Name Day Phone Evening Phone*

\_\_\_\_\_  
*Address City Zip Code*

\_\_\_\_\_  
*Father/Guardian Name Day Phone Evening Phone*

\_\_\_\_\_  
*Address City Zip Code*

\_\_\_\_\_  
*Emergency Contact (other than parent/guardian) Day Phone Evening Phone*

\_\_\_\_\_  
*Address City Zip Code*

Do you know of any health factor that makes it advisable for your child to follow a limited program of physical activity while participating in the Natural Resources Careers Conference?  
YES \_\_\_\_ NO \_\_\_\_

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_  
Is your child on any prescription medication? YES \_\_\_\_ NO \_\_\_\_

If yes, please specify: \_\_\_\_\_

Does your child require a special diet? YES \_\_\_\_ NO \_\_\_\_

Is your child a vegetarian? YES \_\_\_\_ NO \_\_\_\_

Does your child have allergies? YES \_\_\_\_ NO \_\_\_\_

Foods \_\_\_\_ Asthma \_\_\_\_ Hay Fever \_\_\_\_ Poison Ivy \_\_\_\_ Bee Stings \_\_\_\_ Other allergy \_\_\_\_

Please explain: \_\_\_\_\_

Has your child had a tetanus shot? YES \_\_\_\_ NO \_\_\_\_ If yes, most recent shot date \_\_\_\_\_

Is your child covered by medical insurance? YES \_\_\_\_ NO \_\_\_\_

**2006 Natural Resources Careers Conference  
Medical Insurance**

Insurance Company's Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Policy Holder: \_\_\_\_\_

**Authorization of Treatment**

Student Applicant: \_\_\_\_\_  
*Last First Middle*

I hereby give my permission to the medical personnel selected by the director to order x-ray, routine tests, treatment, and necessary transportation for my child. In the event I cannot be reached in an emergency, I hereby give my permission to the physician selected by the Director to secure and administer treatment, including authorization, for my child named above. The completed forms may be photocopied for trips during the Natural Resources Careers Conference.

\_\_\_\_\_  
*Signature of Parent Guardian Date*